PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 09 943-610													l
Effective October 1, 2000									500-4058 X				
			SMALL EI	NTITY	OR	OTHER							
TOTAL CLAIMS			24					RATE	FEE]	RATE	FEE	
FO	R	NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TO	TAL CHARGEA	ey minus 20=		• 4			X\$ 9=		OR	X\$18=	112		
IND	EPENDENT CL	AIMS	4 minus 3 =		• /			X40=		OR	X80=	87)	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=/		
• If	the difference		TOTAL		OR	TOTAL	860						
	C					OTHER		ŀ					
(Column 1)					mn 2) ÆST	(Column 3)		SMALL		OR 1	SMALL	750.4	
AT.		REMAINING AFTER		NUN PREVI	IBER OUSLY	PRESENT EXTRA		RATÉ	ADDI- TIONAL		RATE	ADDI- TIONAL	
ME	Total	AMENDMENT		PAID	FOR				FEE		44.7	A K	
AMENDMENT	Independent	•	Minus Minus	000		=		X\$ 9=		OR	X\$18=.		1
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X40=	•	OR	X80 <u>⇒</u>	14.	÷
								+135≐		OR	+270=		
				1		+		ADDIT, FEE	1	ОЯ	TOTAL ADDIT, FEE	W.	57
		(Column 1)	leher Miliopaere		mn 2)	(Column 3)	1	•	31			A. I	
MENDMENTAB		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDE	(1) 1 ()
	Total	107	Minus		X		,	X\$ 9≝		ÔR	X\$18		
MEN	Independent (Minus	***				X40≑			XBO		4
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									ОĤ			
								+135=		OR	+270		
								TOTAL ADDIT. FEE		OR	ADDIT. FEE	D D.A.	1
	A CALL	(Column 1)			mn 2) HEST	(Column 3)							Ç.
ENTC		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE		
MON	Total		Minus	*	· :	= '.		X\$ 9=		OR	X\$18=	4.4	
AME	Independent'		Minus	***		= .		X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPEN			PENDEN	T CLAIM		1			OR			
	If the entry in colu	mn 1 is less than t	ne entry in colu	mn 2. writ	e "O" in co	tumn 3.	l	+135==		OR	+270=		
-	If the "Highest Nu	mber Previously P	aid For IN THE	S SPACE	is less the	ın 20, enter "20.	• /	TOTAL ADDIT. FEE		OR	ADDIT. FEE		,
	The 1-lighest Nun	nber Previously Pa	id For (Total or	Independ	ient) is the	highest numb	er fou	and in the app	propriate box	k ju co	lumn 1.		

FORM PTO-875

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